

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Div. Environmental Health, 11 SHS
(207) 287-2070 FAX (207) 287-4172

| | | | |
|--|---|--|---|
| PROPERTY LOCATION | | >> CAUTION: LPI APPROVAL REQUIRED << | |
| City, Town, or Plantation | LAMOINE | Town/City | Lamoine Permit # 8004 |
| Street or Road | BROWN LANE | Date Permit Issued | 9/16/20 Fee \$ 265 Double Fee Charged () |
| Subdivision, Lot # | | Local Plumbing Inspector Signature | L.P.I. # 394 |
| OWNER/APPLICANT INFORMATION | | Fee: \$ 265 state min. fee Locally adopted fee | |
| Name (last, first, MI) | MOLDAWER | Copy: <input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State | |
| Mailing Address of | CHRIS HOLT PEACOCK BUILDERS 1341 STATE HIGHWAY 102 BAR HARBOR, ME. 04609 | The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules. | |
| Daytime Tel. # | (207) 801-2620 | Municipal Tax Map # Lot # | |
| email address: | | | |
| OWNER OR APPLICANT STATEMENT | | CAUTION: INSPECTION REQUIRED | |
| I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit. | | I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application. | |
| Digitally signed by Lyle Moldawer PhD Signature of Owner or Applicant Date 2020.09.14 | | (1st Date Approved) | |
| | | Local Plumbing Inspector Signature (2nd Date Approved) | |

| | | |
|--|---|---|
| PERMIT INFORMATION | | |
| TYPE OF APPLICATION | THIS APPLICATION REQUIRES | DISPOSAL SYSTEM COMPONENT(S) |
| <input type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Year Installed: _____ <input checked="" type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <25% <input checked="" type="checkbox"/> b. Major Expansion ≥ 25% <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion | <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit | <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components |
| SIZE OF PROPERTY | DISPOSAL SYSTEM TO SERVE | TYPE OF WATER SUPPLY |
| <input type="checkbox"/> sq. ft. 1 3/4 <input checked="" type="checkbox"/> acres | <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 5 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____ | <input type="checkbox"/> Proposed <input checked="" type="checkbox"/> Existing <input type="checkbox"/> 1. Drilled Well <input checked="" type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____ |
| SHORELAND ZONING | Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped | |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

| | | | |
|---|--|--|---|
| TREATMENT TANK | DISPOSAL FIELD TYPE & SIZE | GARBAGE DISPOSAL UNIT | DESIGN FLOW |
| <input checked="" type="checkbox"/> 1. Concrete EXISTING <input type="checkbox"/> a. Regular 1000 GAL <input type="checkbox"/> b. Low Profile <input type="checkbox"/> c. with lift station AND <input type="checkbox"/> d. water tight PROPOSED <input type="checkbox"/> e. two compartment 1000 GAL. <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 2000 gallons | <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device 2 CSIDE <input type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 1540 sq. ft. <input type="checkbox"/> lin. ft. | <input type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet | 450 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities 5 BEDROOM HOUSE 5 x 90 GPD = 450 GPD |
| SOIL DATA & DESIGN CLASS | DISPOSAL FIELD SIZING | EFFLUENT/JECTOR PUMP | LATITUDE AND LONGITUDE |
| PROFILE CONDITION 3 / C at Observation Hole # 1 Depth 18" OF MOST LIMITING SOIL FACTOR | <input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd | <input type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May be Required <input checked="" type="checkbox"/> 3. Required, EXISTING Specify only for engineered systems DOSE: _____ gallons | <input checked="" type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. 44° 25' 25.2" N Lon. 68° 16' 21.4" W If g.p.s., state margin of error: 30' |

SITE EVALUATOR STATEMENT

I certify that on 7-21-2020 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature: William A. LaBelle, Jr.
 Site Evaluator Name Printed: WILLIAM A. LaBELLE, JR.
 SE#: 319
 Telephone Number: (207) 537-5900
 Date: 7-29-20
 E-mail Address: labelleseptic@rivah.net

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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Owner or Applicant Name
MOLDAYE R

Scale 1" = 50 Ft.

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)

Racoon Cove Road

Partridge Cove Road

Seal Point Road

Brown Lane

*SITE

Bay

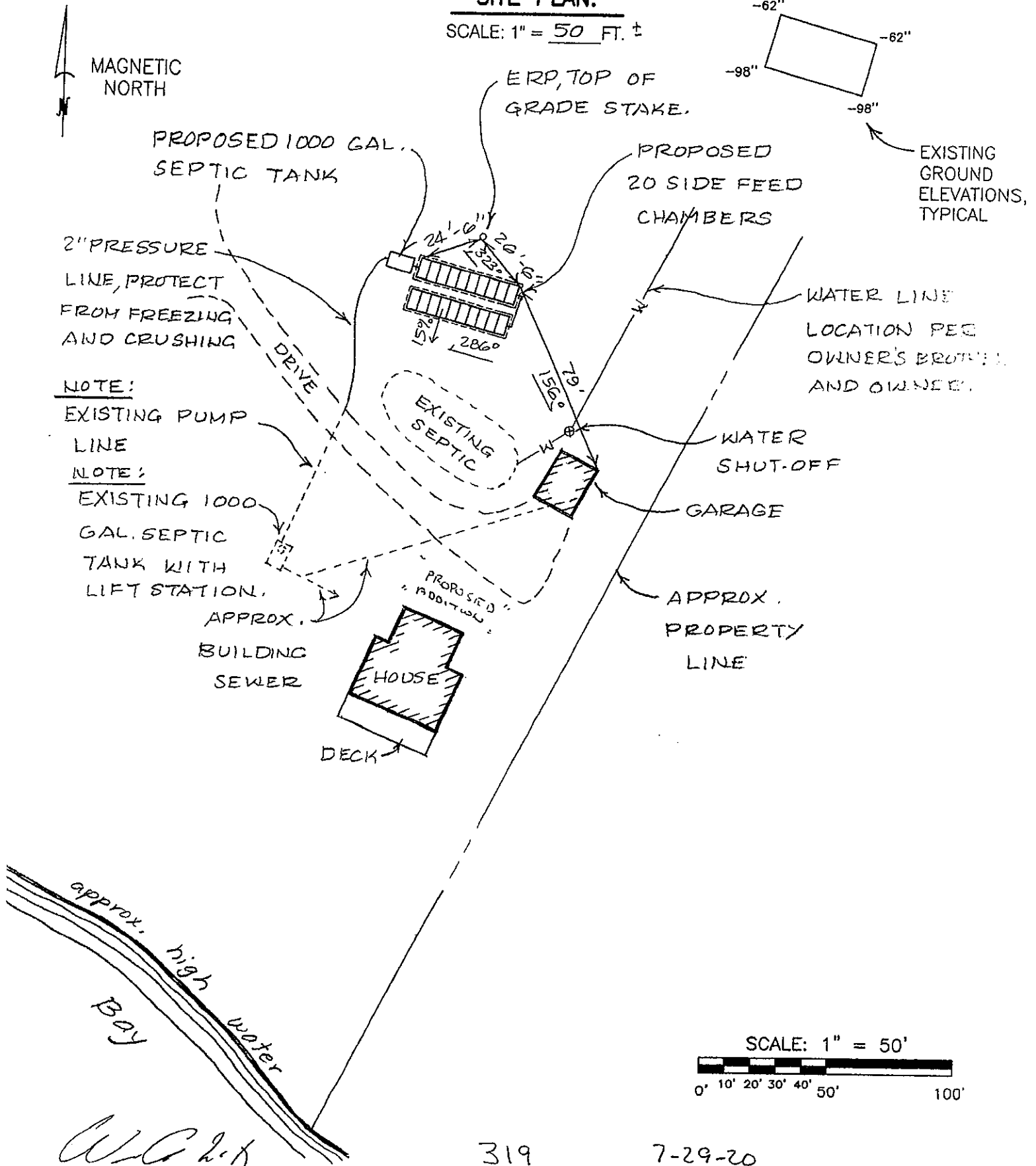
WEST P/L NOT MARKED - OWNER MUST VERIFY
IT IS 21' MIN FROM CHAMBERS BEFORE INSTALLATION.

7-29-20
Date

| | | |
|--|--|--|
| Town, City, Plantation LAMOINE | Street, Road, Subdivision BROWN LANE | Owner or Applicant Name MOLDAUER |
|--|--|--|

SITE PLAN:

SCALE: 1" = 50 FT. ±



Site Evaluator's Signature

S.E. #

Date

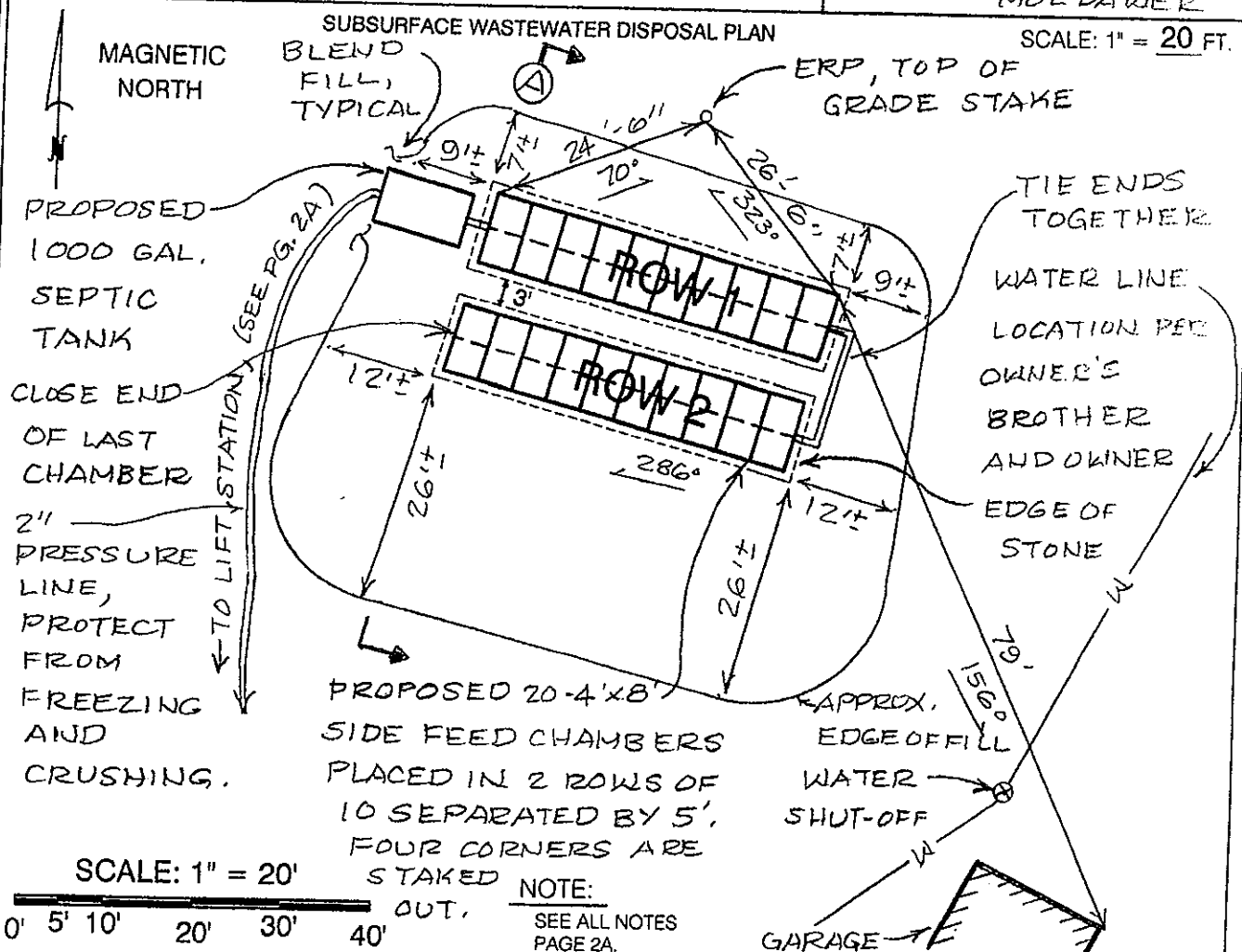
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| FILL REQUIREMENTS | | CONSTRUCTION ELEVATIONS | | SYSTEM: | PRIVATE: | ELEVATION REFERENCE POINT |
|---|---------|--|------|----------|----------|---|
| Depth of Backfill (Upslope) | 17'1/2" | Finished Grade Elevation | (See | attached | N/A | Location & Description TOP OF GRADE STAKE 30" |
| Depth of Backfill (Downslope) | 27" | Top of Distribution Pipe or Proprietary Device | (See | attached | N/A | ABOVE GROUND. |
| Depths @ cross-section shown below or on X-sec. detail. | | Bottom of Disposal Field | (See | X-sec.) | | Reference Elevation is: 0" |

NOTES:

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. All work done adjacent to wetlands, water bodies and water courses must be done in compliance with Section 12 of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPs" (DEPW0588).
4. Install water tight risers of appropriate size to within 6" of finished grade on tank inlet, cleanout and outlet covers (recommend all to finish grade). Install water tight risers of appropriate size to finish grade on outlet tank covers, which house a filter, in-tank pump chambers and separate pump tanks. (Section 6-F of the subsurface code).
5. Protect lift stations, pump tanks and 2" pressure lines from freezing.
6. Full basement below grade foundation or frost wall must be 20' minimum from edge of disposal field and no full basement, slab, columns or posts must be 15' minimum from edge of disposal field.

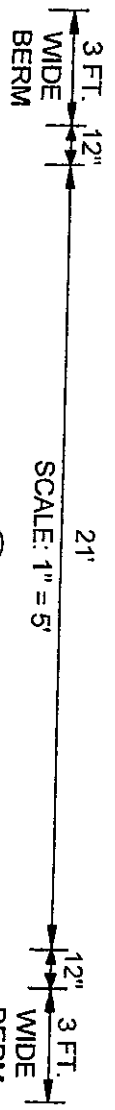
Site Evaluator's Signature

319
S.E. #

7-29-20
Date

NOTE:
GRADE UPSLOPE TO DIVERT
SURFACE WATER AWAY FROM
SYSTEM.

DISPOSAL AREA CROSS SECTION SLOPE 15 %

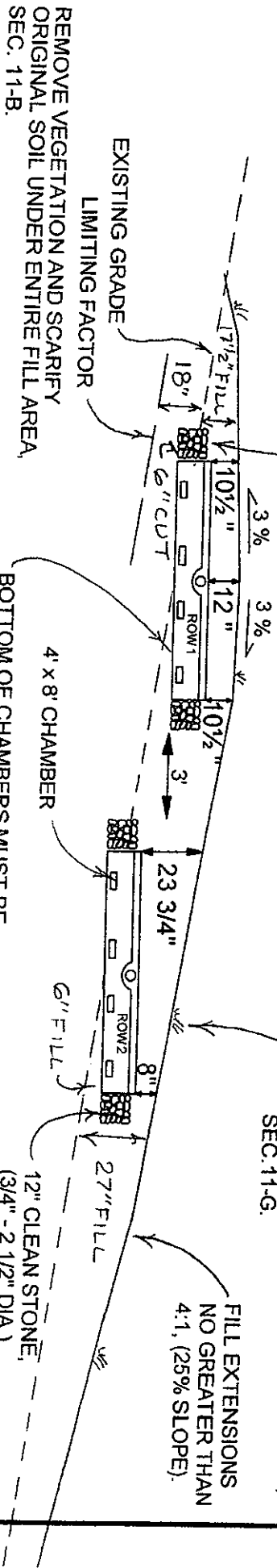


2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F RECOMMENDED OVER STONE AND CHAMBERS

FILL MATERIAL SHALL BE 8"-12" THICK OVER CHAMBERS AND SHALL BE GRAVELLY COARSE SAND TO THE STANDARDS IN SEC. 11-E IN THE SUBSURFACE RULES.

TOP 4" OF FILL TO BE A GOOD LOAM SOIL MIX TO ESTABLISH A GOOD VEGETATIVE COVER; SEED AND MULCH TO PREVENT EROSION, SEC. 11-G.

FILL EXTENSIONS NO GREATER THAN 4:1, (25% SLOPE).



BOTTOM OF CHAMBERS MUST BE LEVEL WITH MAXIMUM GRADE TOLERANCE OF 2" PER 100'.

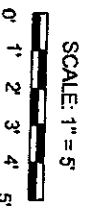
ELEVATIONS:
ELEV. REF. PT. (ERP): 0"

| | | |
|---------------------|---------------|--------------|
| FINISHED GRADE: | ROW 1 | ROW 2 |
| TOP OF CHAMBERS: | (CROWN -4.3") | (-7.1" MIN.) |
| BOTTOM OF CHAMBERS: | -5.5" | -7.9" |
| | -6.8" | -9.2" |

THOROUGHLY MIX, DISK OR ROTO-TILL CLEAN, COARSE, SHARP SAND INTO TOP 6 INCHES OF ORIGINAL SOIL TO CREATE A TRANSITION ZONE, SEC. 11-B.

NOTE:
SYSTEM MUST BE INSTALLED ACCORDING TO THE RULES AND PRACTICES SET FORTH IN THE MOST CURRENT VERSION OF THE STATE OF MAINE SUBSURFACE WASTEWATER DISPOSAL RULES. INSTALLATION CONTRACTOR MUST BE FAMILIAR WITH SAID RULES AND CONSTRUCT SYSTEM IN FULL COMPLIANCE WITH SECTION 11 OF SAID RULES.

OWNER: MOLDAWER
LOCATION: LAMOINE



DOC20

WILLIAM A. LABELLE, JR.

S.E.#

DATE

WAC 2.8

319

7-29-20